## PART B - FEE(S) TRANSMITTAL

614	0 & 2006 W	her with applicable	or <u>Fax</u>	Cor P.O Ale: (571	nmissioner for J. Box 1450 xandria, Virgi 1)-273-2885	r Pate inia 2:	2313-1450			
INSTRUCTIONS: VMs appropriate. All further indicated unless degrees maintenance fee page 200	form should be used for correspondence including the below directed other tions.	or transmitting the ISSU g the Patent, advance o erwise in Block 1, by (a	JE FEE and PUBLIC rders and notification a) specifying a new co	of m orres	ON FEE (if requi- aintenance fees woondence address;	red). B vill be a and/or	Blocks 1 through 5 sho mailed to the current c (b) indicating a separ	ould be com orrespondent ate "FEE AD	pleted where be address as DRESS" for	
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CHAPMAN A 111 WEST MOI CHICAGO, IL (		Certificate of Mailing or Transmission  I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.								
				Br	enda A. Wa	ltor	1	(D	epositor's name)	
				۱۳	Brenda	A.	Walter		(Signature)	
				00	tober 4, 2	2006			(Date)	
APPLICATION NO.	FILING DATE	FILING DATE		TOR	OR A		RNEY DOCKET NO.	CONFIRMATION NO.		
10/523,090 TITLE OF INVENTION	02/02/2005 I: END POSITION DETI	ECTOR FOR MOVABLI	Karl Schnedl E SWITCH PARTS				1716349	854	0	
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE D	UE	PREV. PAID ISSUI	E FEE	TOTAL FEE(S) DUE	DATI	E DUE	
nonprovisional	NO	\$1400	\$300		\$0		\$1700	10/24	4/2006	
EXAMINER		ART UNIT	CLASS-SUBCLASS							
ANGLO, LHEIREN MAE ACOSTA 2832			200-047000							
1. Change of correspond CFR 1.363).  Change of corresp Address form PTO/SI  Tee Address" ind PTO/SB/47; Rev 03-0 Number is required.	(1) the names of u or agents OR, alter (2) the name of a s registered attorney 2 registered patent	printing on the patent front page, list e names of up to 3 registered patent attorneys.  10/86/2006 IBESHAH2 60600045 16523600  10/86/2006 IBESHAH2 60600045 165236000  10/86/2006 IBESHAH2 60600045 165236000  10/86/2006 IBESHAH2 60600045 16523600000000000000000000000000000000000								
3. ASSIGNEE NAME A PLEASE NOTE: Un recordation as set for (A) NAME OF ASSI 1) VAE Eisenl 2) VAE GmbH Please check the appropri	data will appear on the Ta substitute for filing  (B) RESIDENCE: (Called and the Talled and Talled	he pa g an a CITY Au Aus	tent. If an assign issignment. and STATE OR Constria tria	COUNT						
4a. The following fee(s)  State Fee  Description Fee (N)  Advance Order -	Bb. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)  A check is enclosed.  Payment by credit card. Form PTO-2038 is attached.  The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number (enclose an extra copy of this form).									
a. Applicant claim	itus (from status indicated as SMALL ENTITY statu ad Publication Fee (if regreecords of the United	s. See 37 CFR 1.27.		-	-		TITY status. See 37 CF		other party in	
Authorized Signature		tes Palent and Trademark	Office.				per 4, 2006			
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this form and/or suggest Box 1450, Alexandria, V Alexandria, Virginia 223	d application form to the ions for reducing this but /irginia 22313-1450. DC	USPTO. Time will vary den, should be sent to the NOT SEND FEES OR	depending upon the intermetion of the control of th	indivi officer S TO	etain a benefit by t mated to take 12 i dual case. Any co r, U.S. Patent and THIS ADDRESS	he publ ninutes mment Traden S. SENI	ic which is to file (and to complete, including s on the amount of time nark Office, U.S. Depar ) TO: Commissioner fo	e you require tment of Cor or Patents, P.0	a to complete	